

**REVOCAION OF POWER OF ATTORNEY
WITH NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE
ADDRESS**

Application Number	09/800,509
Filing Date	March 8, 2001
First Named Inventor	Ajay P. SRAVANAPUDI et al.
Title	Multimodal Information Services
Art Unit	2655
Examiner Name	Daniel ABEBE
Attorney Docket Number	080759-0018

I hereby revoke all previous powers of attorney given in the above-identified application.

A Power of Attorney is submitted herewith.

OR

I hereby appoint the practitioners associated with the Customer Number:

20277

Please change the correspondence address for the above-identified application to:

The address associated with Customer Number:

20277

OR

Firm or Individual Name

Address

City

Country

Telephone

State

Zip

Email

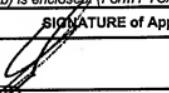
I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature		Date	6/15/08
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Name	Tom Ervin	Telephone	703-261-0040 ext 111
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Title and Company	CFO, Entriveva, Inc.
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NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

*Total of _____ forms are submitted.